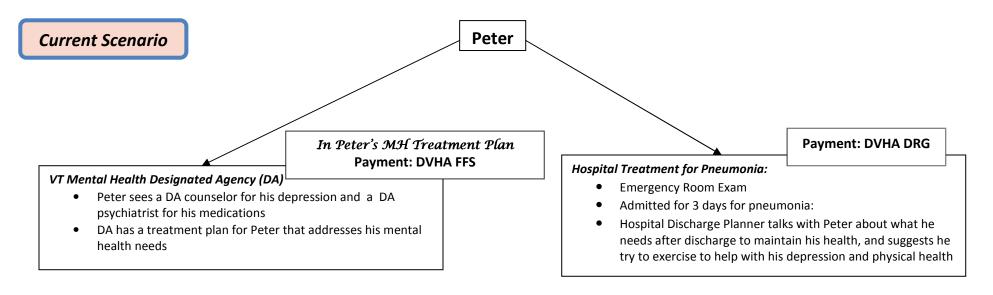
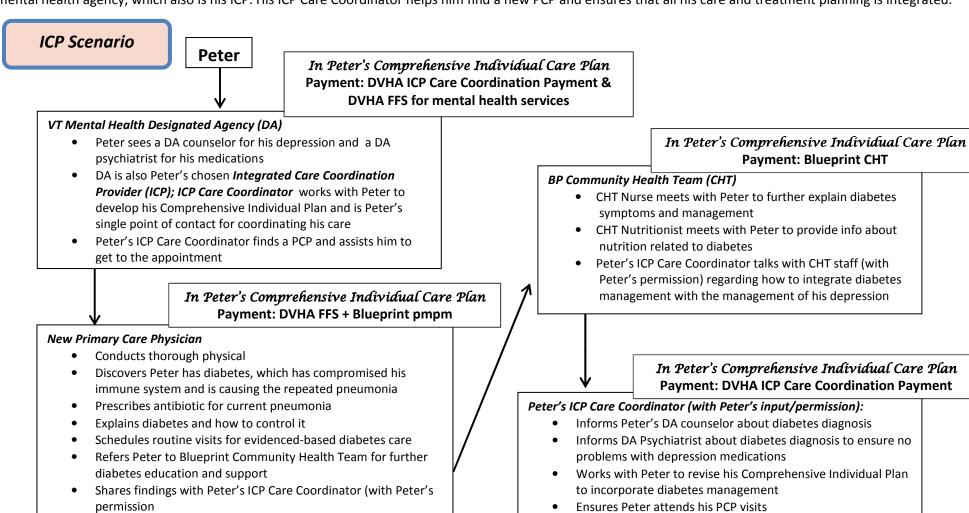
Peter is 50. He and his wife rent an apartment and share a car. They both work and take turns driving each other to work. Fifteen years ago he had a very difficult two years dealing with severe depression and was unable to work for several years. He no longer receives cash benefits but he is dually eligible for Medicaid and Medicare. He has tried to get a primary care physician but has been told that practices are not taking new patients. For the last 5 years he has worked part time as a data entry clerk for a local business. He is good at his job and enjoys it but worries that his continuing problems with depression, the side effects of his medication, and repeated bouts of pneumonia may put his job in jeopardy. He recently ended up in the emergency room and was subsequently hospitalized with severe pneumonia. He receives counseling and depression medication management from the local mental health agency.



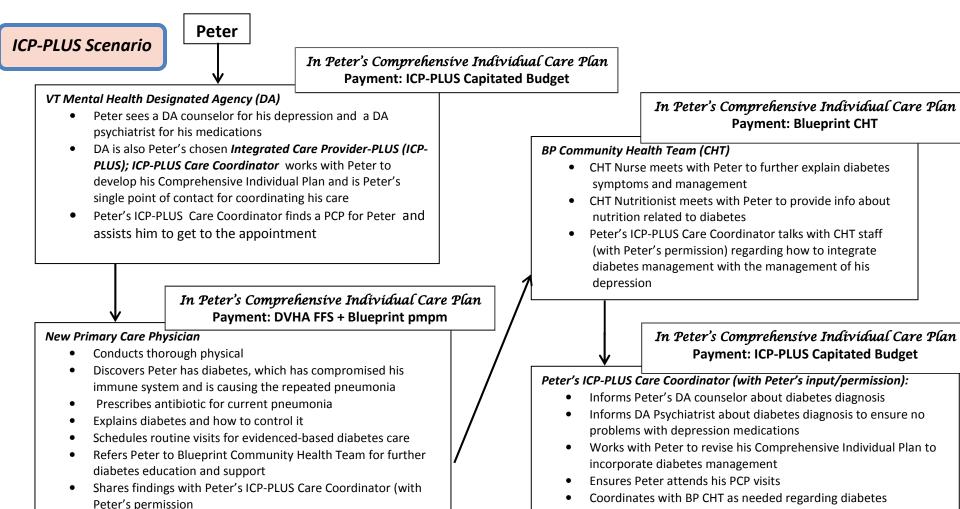
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Coordinates with BP CHT as needed regarding diabetes

management

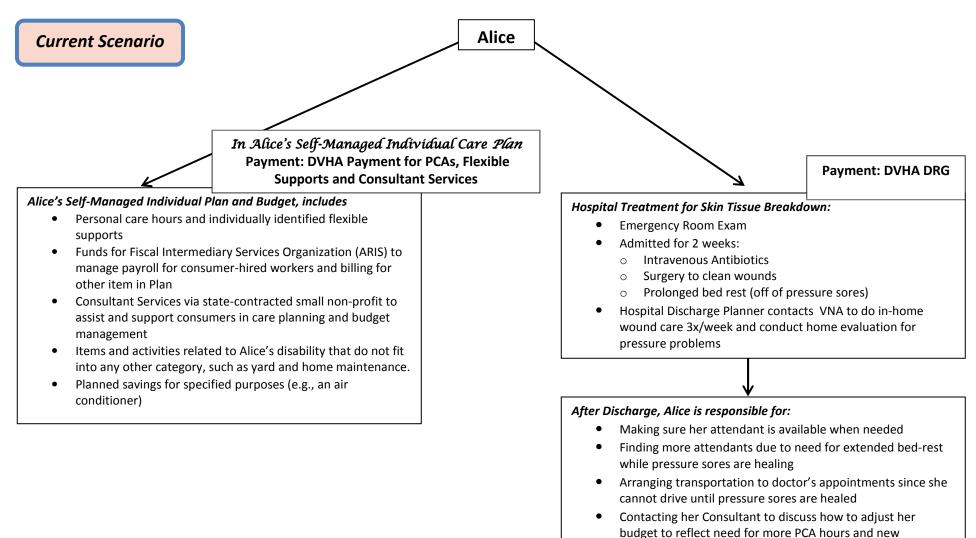
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management

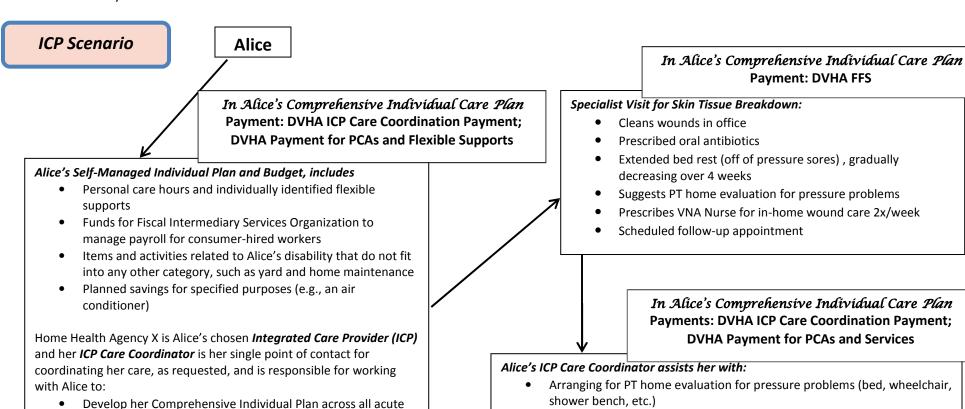
Offers Peter a 12-week exercise class at the local gym

Alice is enrolled in the Choices for Care 1115 Medicaid Long-term Care Waiver and uses the Flexible Choices (self-management) option. She has pretty reliable personal care; but a few weeks ago her evening Personal Care Attendant (PCA) got sick. She was not able to find good backup coverage and spent a couple nights sleeping in her wheelchair. As a result, she has had trouble with skin breakdown and an infection. She called her primary care physician right away, but the practice was slow to refer her to a specialist. She was admitted to the hospital because of the skin breakdown and a fever and they are having trouble getting the infection under control. Alice wants to start planning for going home.



wheelchair cushion

Alice is enrolled in the Dual Eligibles Demonstration which includes the Flexible Choices (self-management) option. She has pretty reliable personal care; but a few weeks ago her evening PCA got sick. She was not able to find good backup coverage and spent a couple nights sleeping in her wheelchair. As a result, she has had trouble with skin breakdown and an infection. She called her ICP Care Coordinator who contacted Alice's PCP to get a referral to a skin specialist. Her ICP Care Coordinator assisted her to get to the Specialist appointment, and then helped Alice coordinate her follow-up care and obtain additional personal care hours and availability.



- o Assisting her to obtain a new wheelchair cushion
- Arranging for VNA Nurse to do in-home wound care 2x/week
- Revising her Individual Plan to incorporate need for more personal care hours
- Developing a plan to ensure PCAs are present as scheduled, and she has pre-arranged emergency back-up PCAs in case of a no-show
- Finding PCAs to fill additional hours while on extended bed rest
- Providing requested assistance to Alice to attend scheduled appointments with skin specialist

appointment

and long-term needs

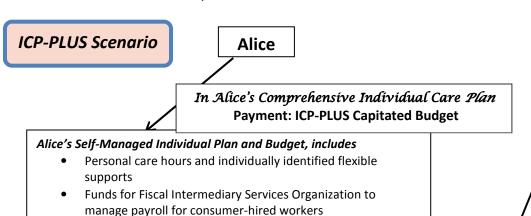
Develop her Self-Managed Individual Plan and Budget, if

requested, and assuring she gets the services she needs

Alice's Care Coordinator contacts her PCP to get a referral to a skin

specialist that day, and then assists her to get to the specialist

Alice is enrolled in the Dual Eligibles Demonstration which includes the Flexible Choices (self-management) option. She has pretty reliable personal care; but a few weeks ago her evening PCA got sick. She was not able to find good backup coverage and spent a couple nights sleeping in her wheelchair. As a result, she has had trouble with skin breakdown and an infection. She called her ICP-PLUS Care Coordinator who contacted Alice's PCP to get a referral to a skin specialist. Her ICP-PLUS Care Coordinator assisted her to get to the Specialist appointment, and then helped Alice coordinate her follow-up care and obtain additional personal care hours and availability.



- Items and activities related to Alice's disability that do not fit into any other category, such as yard and home maintenance
- Planned savings for specified purposes (e.g., an air conditioner)

Home Health Agency X is Alice's chosen Integrated Care Provider-**PLUS (ICP-PLUS)** and her **ICP-PLUS Care Coordinator** is her single point of contact for coordinating her care, as requested, and is responsible for working with Alice to:

- Develop her Comprehensive Individual Plan across all acute and long-term needs
- Develop her Self-Managed Individual Plan and Budget, if requested, and assuring she gets the services she needs

Alice's Care Coordinator contacts her PCP to get a referral to a skin specialist that day, and then assists her to get to the specialist appointment.

In Alice's Comprehensive Individual Care Plan Payment: ICP-PLUS Capitated Budget

Specialist Visit for Skin Tissue Breakdown:

- Cleans wounds in office
- Prescribed oral antibiotics
- Extended bed rest (off of pressure sores), gradually decreasing over 4 weeks
- Suggests PT home evaluation for pressure problems
- Prescribes VNA Nurse for in-home wound care 2x/week
- Scheduled follow-up appointment

In Alice's Comprehensive Individual Care Plan Payment: ICP-PLUS Capitated Budget

- Arranging for PT home evaluation for pressure problems (bed, wheelchair, shower bench, etc.)
 - Assisting her to obtain a new wheelchair cushion
- Arranging for VNA Nurse to do in-home wound care 2x/week
- Revising her Self-Managed Plan to incorporate need for more personal care hours
- Developing a plan to ensure PCAs are present as scheduled, and she has pre-arranged emergency back-up PCAs in case of a no-show
- Finding PCAs to fill additional hours while on extended bed rest
- Providing requested assistance to Alice to attend scheduled appointments with skin specialist
- Using capitation flexibility, Alice's ICP-PLUS coordinator funds a second ramp for Alice.